

AUG 31 2004

PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0851-0035
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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/853,027
Filing Date	August 28, 2003
First Named Inventor	Laurent Schaller
Art Unit	3731
Examiner Name	Unassigned
Attorney Docket Number	CSI-2008C2

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

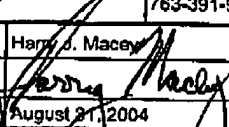
Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **33931**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.I have been discharged by Coalescent Surgical, Inc. in connection with the above-identified
The reasons for this request are: application, which has been acquired by Medtronic, Inc.**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ Customer Number: **OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Jeffrey J. Hohenshell, Esq.				
Address	Medtronic, Inc.				
Address	7601 Northland Drive				
City	Brooklyn Park	State	MN	Zip	55428
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Name	Harry J. Macey				
Signature				Registration No.	32,818
Date	August 31, 2004			Telephone No.	650-654-9555

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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